

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 1 OF 2  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00004036	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Image Pointe</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>01 / 15 / 2016</b>		
Mailing Address <b>1224 La Porte Road</b>			Amount <b>1550.00</b>		
City <b>Waterloo</b>	State <b>IA</b>	Zip Code <b>50702</b>	Transaction ID : <b>D362780</b>		
Purpose of Expenditure Estimated Cost: <b>Skullies</b>		Category/ Type <b>006</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>01 / 13 / 2016</b>		
Name of Federal Candidate <b>HILLARY RODHAM CLINTON</b>			<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>IA</b>		
Calendar Year-To-Date Per Election for Office Sought <b>5008.00</b>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <b>Image Pointe</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>01 / 15 / 2016</b>		
Mailing Address <b>1224 La Porte Road</b>			Amount <b>3110.00</b>		
City <b>Waterloo</b>	State <b>IA</b>	Zip Code <b>50702</b>	Transaction ID : <b>D362781</b>		
Purpose of Expenditure Estimated Cost: <b>T-shirts</b>		Category/ Type <b>006</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>01 / 13 / 2016</b>		
Name of Federal Candidate <b>HILLARY RODHAM CLINTON</b>			<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>IA</b>		
Calendar Year-To-Date Per Election for Office Sought <b>5008.00</b>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>4660.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael P. Fishman

[Electronically Filed]

Date

MM / DD / YYYY  
**01 / 16 / 2016**

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 2 OF 2  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00004036       </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name of Payee <b>SEIU General Fund</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">01</div> <div style="border: 1px solid black; padding: 2px;">15</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 1800 Massachusetts Ave NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">348.00</div>	
City State Zip Code Washington DC 20036	<b>Transaction ID : D362782</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">01</div> <div style="border: 1px solid black; padding: 2px;">13</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>		
Purpose of Expenditure Estimated Cost: Stickers	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">006</div>	Name of Federal Candidate <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <b>HILLARY RODHAM CLINTON</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">5008.00</div>		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IA</u> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ► _____	

Full Name of Payee		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;"></div> <div style="border: 1px solid black; padding: 2px;"></div> <div style="border: 1px solid black; padding: 2px;"></div> </div>	
Mailing Address		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
City State Zip Code	Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;"></div> <div style="border: 1px solid black; padding: 2px;"></div> <div style="border: 1px solid black; padding: 2px;"></div> </div>		
Purpose of Expenditure	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	Name of Federal Candidate <input type="checkbox"/> Support <input type="checkbox"/> Oppose _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____ Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ► _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;">348.00</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) <b>TOTAL</b> Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;">5008.00</div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael P. Fishman

[Electronically Filed]

Date

01

16

2016

Signature